Athol, MA Community, High Public Payer

Athol Hospital is a nonprofit community-High Public Payer (HPP) hospital located in the Central Massachusetts region. It is the smallest acute hospital in Massachusetts, with 11 staffed beds. It is a member of Heywood Healthcare, and is designated by the Centers for Medicare & Medicaid Services (CMS) as one of three Critical Access Hospitals (CAH) in Massachusetts. Athol Hospital reported a loss for FY15 after it earned a profit in FY13 and FY14, with a -1.7% total margin in FY15 compared with a median total margin of 5.4% in its peer cohort.

Overview / Size

Hospital System Affiliation: Heywood Healthcare Change in Ownership (FY11-FY15): Heywood Healthcare - 2012 Total Staffed Beds: 15, the smallest acute hospital % Occupancy: 60.0%, < cohort avg. (65%) CHART[↑], ICB^θ Special Public Funding: Trauma Center Designation: Not Applicable Case Mix Index: 0.87, = cohort avg. (0.87); < statewide (1.02)

Financial

Inpatient NPSR per CMAD:	\$5,042
Change FY14-FY15:	-62.7%
Inpatient:Outpatient Revenue in FY15:	12%:88%
Outpatient Revenue in FY15:	\$18,869,601
Change FY14-FY15:	24.1%
Total Revenue in FY15:	\$23,009,035
Total Surplus (Loss) in FY15:	(\$402,216)

Payer Mix

Public Payer Mix:	67.5% (HPP* Hospital)
CY15 Commercial Relative Price:	0.95
Top 3 Commercial Payers:	Fallon Health
	Blue Cross Blue Shield of MA
	Tufts Health Plan

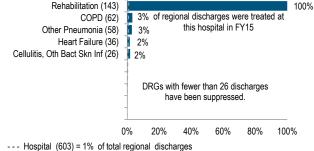
Utilization

Inpatient Discharges in FY15:	603
Change FY14-FY15:	5.2%
Emergency Department Visits in FY15:	10,588
Change FY14-FY15:	6.3%
Outpatient Visits in FY15:	10,856
Change FY14-FY15:	-71.8%

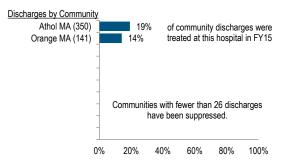
Quality	
Readmission Rate in FY15:	15.3%
Change FY11-FY15 (percentage points):	0.7%
Early Elective Deliveries Rate (Jan 2015-Jun 2016):	Not Available

What were the most common inpatient cases (DRGs) treated at the hospital in FY15? What proportion of the region's cases did this hospital treat for each service?

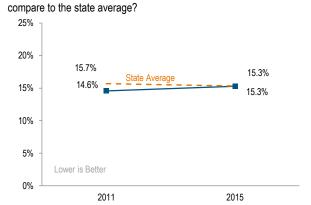




Where did most of the hospital's inpatients reside? What proportion of each community's total discharges was attributed to this hospital?



What proportion of adult patient discharges from this hospital resulted in a readmission at any hospital within 30 days, and how does this compare to the state average?



How many central line-associated blood stream infections (CLABSI). catheter-associated urinary tract infections (CAUTI), and surgical site infections (SSI) after colon surgery did patients get at this hospital compared to what was expected based on the hospital's characteristics and case mix?

Data for these measures is not available.

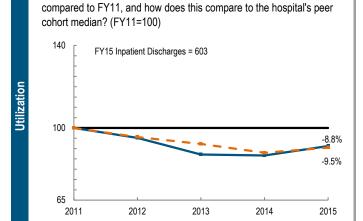
For descriptions of the metrics, please see the technical appendix

2015 HOSPITAL PROFILE: ATHOL HOSPITAL

Cohort: Community, High Public Payer

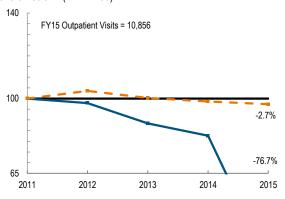
Key:

Hospital
Peer Cohort

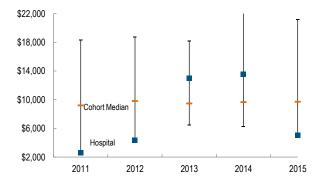


How has the volume of the hospital's inpatient discharges changed

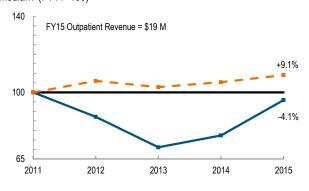
How has the volume of the hospital's outpatient visits changed compared to FY11, and how does this compare to the hospital's peer cohort median? (FY11=100)



What was the hospital's net inpatient service revenue per case mix adjusted discharge between FY11 and FY15, and how does this compare to the hospital's peer cohort median?



How has the hospital's total outpatient revenue changed compared to FY11, and how does this compare to the hospital's peer cohort median? (FY11=100)



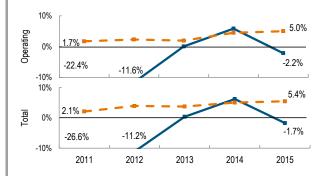
How have the hospital's total revenue and costs changed between FY11 and FY15?

Revenue, Cost, & Profit/Loss (in millions)

Patient Revenue Trends

FY	2011	2012	2013	2014	2015
Operating Revenue	\$ 19	\$ 20	\$ 19	\$ 23	\$ 23
Non-Operating Revenue	\$ (1)	\$ 0	\$ 0	\$ 0	\$ 0
Total Revenue	\$ 18	\$ 20	\$ 20	\$ 23	\$ 23
Total Costs	\$ 22	\$ 22	\$ 19	\$ 21	\$ 23
Total Profit (Loss)	\$ (4.7)	\$ (2.3)	\$ 0.1	\$ 1.4	\$ (0.4)

What were the hospital's total margin and operating margins between FY11 and FY15, and how do these compare to the hospital's peer cohort medians?



For descriptions of the metrics, please see the technical appendix.



⁶ For more information on Infrastructure and Capacity Building (ICB) special funding, please contact the Massachusetts Executive Office of Health and Human Services (EOHHS).

^{*} High Public Payer Hospitals (HPP) receive a minimum of 63% of gross patient service revenue from public payers.

[^] For more information on Community Hospital Acceleration, Revitalization and Transformation (CHART) special funding, please contact the Health Policy Commission (HPC).